

# How to improve geriatric oncology in Japan ?



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## What has brought me to the Course

Geriatric oncology in Japan is still developing. Collaboration between geriatricians and oncologists needs to be established. My objective is

- to understand how to work together in harmony with geriatricians
- to become a bridge between oncologists and geriatricians in Japan
- to contribute to the field of geriatric oncology in Japan

## What has improved in my institution since

Our university has geriatric department, thus we have started to collaborate with geriatricians to improve the care of older patients with cancer. We have started

- to discuss difficult cases between geriatricians and oncologists at regular conference
- to perform GA screening and full GA if needed

## How to develop links between oncology and geriatrics in the future

In Japan, compared to increasing geriatric population, we don't have enough geriatricians; oncologist themselves have to assess geriatric patients. Oncologists should lead multidisciplinary team and educate other health-care providers. Oncologists in Japan need to learn more about geriatric oncology.

- **Similar learning course as this SIOG Advanced Course is needed in Japan, especially for oncologists.**
  - ✓ JSMO is planning to hold 1-day or 2-day workshop next year.
  - ✓ Half-day seminar for oncologists will be held on 21 March 2018.

## My research plans

### 1. Association between GA screening and full GA among Japanese patients

All cancer patients  $\geq 70$  years



G8, VES13, CGA7 and CSGA

- Relevance of GA screening and full GA in Japan would be demonstrated.

### 2. Validation of GA for predicting the tolerability of outpatient chemotherapy

- ✓ Continuation of planned chemotherapy for at least 3 months
- ✓ No hospitalization due to adverse events during chemotherapy period

- Not only toxicity but tolerability of chemotherapy itself should be evaluated.